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| Application Number | 10/645,428 |
| Filing Date | 08-21-2003 |
| First Named Inventor | M. Seul |
| Art Unit | 1641 |
| Examiner Name | P. Do |
| Attorney Docket Number | LEAPS-C11 |

I hereby revoke all previous powers of attorney given in the above-identified application. A Power of Attorney is submitted herewith.**OR** I hereby appoint the practitioners associated with the Customer Number: 36038 Please change the correspondence address for the above-identified application to: The address associated with Customer Number: 36038**OR**

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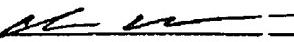
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I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)***SIGNATURE of Applicant or Assignee of Record**

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|------|-----------|--|--|
| Name | Chiu Chau | | |
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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 *Total of _____ forms are submitted.

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